

Under the provisions of Section 413.031 of the Texas Workers' Compensation Act, Title 5, Subtitle A of the Texas Labor Code, effective June 17, 2001 and Commission Rule 133.305, titled Medical Dispute Resolution-General, and 133.307, titled Medical Dispute Resolution of a Medical Fee Dispute, a review was conducted by the Division regarding a medical fee dispute between the requestor and the respondent named above. This dispute was received on 3/24/03.

I. DISPUTE

Whether there should be reimbursement for E-1399 TENS unit supplies (electrodes) x 5 units from 6/12/02 through 12/12/02. Neither the requestor nor the respondent submitted EOBs; therefore review will be in accordance with the 1996 Medical Fee Guideline.

II. RATIONALE

The requestor submitted convincing evidence of carrier receipt of their request for EOBs in compliance with Rule 133.307 (e)(2)(b).

The 1996 Medical Fee Guideline, DME Ground Rules (IV) states, "This document does not contain a specific MAR for the DME items. The DME items should be billed at the usual and customary rate of the DME provider, and the insurance carrier shall reimburse the DME provider at an amount pre-negotiated between the provider and carrier or, if there is no pre-negotiated amount, the fair and reasonable rate for the item described. Use the miscellaneous HCPCS code, E1399..." According to the DME Ground Rule IX(c), "A fair and reasonable reimbursement shall be the same as the fees set for the "D" codes in the 1991 Medical Fee Guideline. In this case, the "D" code for tens supplies is D0374. On this basis, reimbursement of \$425.00 (\$85.00 x 5 units = \$425.00) is recommended.

III. DECISION & ORDER

Based upon the review of the disputed healthcare services within this request, the Division has determined that the requestor **is** entitled to reimbursement for E1399 x 5 units in the amount of **\$425.00**. Pursuant to Sections 402.042, 413.016, 413.031, and 413.019 the Division hereby **ORDERS** the Respondent to remit **\$425.00** plus all accrued interest due at the time of payment to the Requestor within 20 days receipt of this Order.

The above Findings, Decision and Order are hereby issued this 24th day of September, 2004.

Noel L. Beavers
Medical Dispute Resolution Officer
Medical Review Division

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